P.O. Box 017 Trenton, NJ 08666-0017

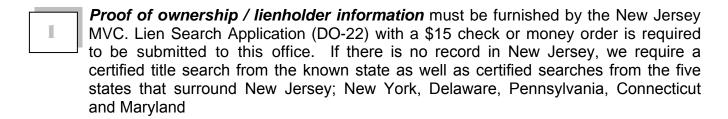
STATE OF NEW JERSEY

1-888-486-3339 ext. 5064 (in state) 1-609-292-6500 ext. 5064 (out of state)

ΙE

Improper Evidence of Ownership Procedure

The following 12 step procedure must be mailed to the address located on the bottom of page two for processing (**Do not mail any of the following steps until the entire procedure is complete.**) This procedure is for vehicles/vessels obtained without proper evidence of ownership. **Each case is handled on an individual basis and additional documents may be required.** This procedure applies to New Jersey residents only.



STOP HERE: Once step 1 has been completed, please mail the DO-22 form to Po Box 146 Trenton NJ 08666. **DO NOT CONTINUE** until you receive the title/lien search information back from the NJ Motor Vehicle Commission. Once a response is received, you may continue to follow the remainder of this procedure in the outlined order.

- **Emergency Application for Vehicle Title** (OS/SS-150), fully completed and notarized, is required to be submitted to this office. Include a daytime telephone number on this form. (Application enclosed)
- Original Certified Affidavit of Newspaper Publication is required to be submitted to this office. (See enclosed sample publication OS/SS-153)
- Publication notice sent to the local police department in the municipality in which you reside. Notice must be sent by Certified Mail, Return Receipt Requested. The original signed receipt must be provided to this office.
- Notice of Intent to Obtain Title (OS/SS-145) must be sent by Certified Mail, Return Receipt Requested to the owner and lienholder (if applicable) stating your intent to obtain title through New Jersey MVC. A copy of the notice and the original signed return receipt(s) are required to be submitted to this office. If the certified notice is unclaimed or undeliverable, the notice must then be sent by regular mail.

Important Note for Steps 4 & 5: Regarding steps 4 & 5, if any notice(s) are returned as undeliverable, the original unopened, undelivered envelope(s) with U.S. Postal Service notation showing the reason(s) for non-delivery is required to be submitted to this office. Photocopies are not acceptable.

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6	Original evidence of purchase (title, bill of sale, invoice, etc.) which describes the vehicle/vessel by year, make and complete vehicle/hull identification number is required to be submitted to this office.
7	Original notarized statements from three disinterested parties stating that they have seen the vehicle/vessel in your possession is required to be submitted to this office. Statement must include a complete description of the vehicle/vessel, the vehicle/hull identification number, the approximate date possession was first witnessed and that vehicle/vessel has remained in your possession since that time. Must be a separate notarized statement for each disinterested party.
8	Pencil tracing or photograph of VIN (vehicle identification number) from the VIN plate is required to be submitted to this office. If you are unable to obtain a pencil tracing or photograph of the vehicle/hull identification number, due to the position of the VIN/HIN plate, include a notarized statement explaining the circumstances. Also state that you physically examined the vehicle/vessel and provide the vehicle/hull identification number shown on the VIN/HIN plate.
9	Four photos of the vehicle are required (Front, back, passenger and driver side)
10	<i>Application for Certificate of Ownership</i> (OS/SS-7) fully completed. For vessels, the completed Application for Certificate of Vessel or Hull Ownership (OS/SS-27) is required to be submitted to this office. If New Jersey licensed dealer, the sales tax stamp on back of application for title (OS/SS-7 or OS/SS-27). Individuals will complete sales tax on the front of the application.
11	A check or money order in the amount of \$60.00 made payable to "NJMVC" for the title fee is required (\$85.00 fee is required if there is a lien). 7% Sales tax of the purchase price of the vehicle is also required to be submitted to this office. There will be a \$25 penalty fee, in addition to the title fee, if the vehicle is not titled within 10 days of the date of sale only if the original state of record is New Jersey. One check or money order may be submitted for title and sales tax fees.
12	Buyer's Certification (OS/SS-94) from applicant that the vehicle/vessel is for personal use only and not for resale, or that applicant is a licensed New Jersey dealer is required to be submitted to this office.

Any vessel's 12 feet and under or trailer's weighing less than 2,500 lbs empty are considered non-titled in the State of New Jersey. To ensure all fees are collected properly, please include a blank check to cover all taxes and registration costs. Please enclose the attached BA-49 for all trailers or The Application for Boat Registration for all Vessels.

After making copies for your records, mail required (original) documentation to:

NJ Motor Vehicle Commission Special Title/Foreign Title Unit 225 East State Street P.O. Box 017 Trenton, New Jersey 08666-0017

Certified Information Unit P.O. Box 146 Trenton, New Jersey 08666-0146 609-292-4102

LIEN SEARCH

All requests for lien information must be submitted on form DO-22. One record search per form. This form may be photocopied for your convenience. No other form of request will be accepted. Proper fee must accompany request form. Make check or money order (**DO NOT SEND CASH**) payable to the New Jersey Motor Vehicle Commission.

ALL SECTIONS OF THIS APPLICATION MUST BE COMPLETED TO OBTAIN INFORMATION (PLEASE PRINT CLEARLY)

Requester Name:	Phon	ne Number:
Business Name (if applicable):	Your	Claim or File #:
Street Address:		
City:	State:	Zip Code:
REQUESTER'S DRIVER LICENSE NUMBER:(PHOTOCO	PY OF CURRENT DRIV	VER LICENSE MUST BE INCLUDED)
I am requesting lien information on: (CHECK ONE)	MY OWN RECOR	D ANOTHER'S RECORD
Year:	Make:	
Vehicle/Hull Identification Number (VIN/HIN):		
This request is being made for the following reason(s) Explain in detail your reason for requesting the information and how	you plan to use the informa	ation. Attach any supporting documentation.
If involving a lawsuit, please state your relationship to	the case and type of la	wsuit involved:

FEE: \$15 per record search

The disclosure and use of the <u>personal information</u> (1) contained in the record you have requested is governed by the "Drivers' Privacy Protection Act", <u>N.J.S.A.</u> 39:2-3.3 <u>et seq</u>. The "Drivers' Privacy Protection Act" provides that a person who knowingly obtains or discloses information from a motor vehicle record for any use not permitted by the Act is guilty of a crime of the fourth degree and can be held liable, in a civil action in the Superior Court, to the individual to whom the information pertains, including an award of actual damages, punitive damages, and reasonable attorney's fees and litigation costs.

(1) "Personal Information" means information that identifies an individual, including an individual's photograph; social security number; driver identification number; name; address other than the five-digit zip code; telephone number; and medical or disability information, but does not include information on vehicular accidents, driving violations, and driver's status.

You may either print the form on both sides of a single sheet <u>or</u> print and attach the two separate sheets. Both pages 1 and 2 must be completed and submitted for you request to be considered.

REQUESTER'S PRINTED NAME AND SIGNATURE ARE REQUIRED ON NEXT PAGE.

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Requester's	Name:	
•		PRINT NAME

USES PERMITTED AS SET FORTH IN N.J.S.A. 39:2-3.4(c)

- For use in connection with matters of motor vehicle or driver safety and theft: motor vehicle emissions; motor vehicle product alterations, recalls, or advisories; performance monitoring of motor vehicles, motor vehicle parts and dealers; motor vehicle market research activities, including survey research; and the removal of non-owner records from the original owner records of motor vehicle manufacturers.
- 2. For use in the normal course of business by a legitimate business or its agents, employees or contractors, but only:
 - a. to verify the accuracy of personal information submitted by the individual to the business or its agents, employees, or contractors; and
 - b. if such information as so submitted is not correct or is no longer correct, to obtain the correct information, but only for the purposes of preventing fraud by, pursuing legal remedies against, or recovering on a debt of security interest against the individual.
- 3. For use in connection with any civil, criminal, administrative or arbitral proceeding in any federal, state or local court or agency or before any self-regulatory body, including service of process, investigation in anticipation of litigation, and the execution or enforcement of judgments and orders, or pursuant to an order of a federal, state or local court.
- 4. For use in research activities, and for use in producing statistical reports, so long as the personal information is not published, redisclosed, or used to contact individuals.
- 5. For use by any insurer or insurance support organization, or by a self-insured entity, or its agents, employees, or contractors, in connection with claims investigation activities, antifraud activities, rating or underwriting.
- 6. For use in providing notice to the owners of towed or impounded vehicles.
- 7. For use by an employer or its agent or insurer to obtain or verify information relating to a holder of a commercial driver's license that is required under the "Commercial Motor Vehicle Safety Act," 49 U.S.C. App. § 2710 et seq.
- 8. For use in connection with the operation of private toll transportation facilities.
- 9. For use by any requester, if the requestor demonstrates it has obtained the notarized written consent of the individual to whom the information pertains. Must attach Notarized Authorization To Release Personal Motor Vehicle Information form DO-21A.

I certify that I will use any personal information contained in the record(s) I have requested only as permitted by the "Drivers' Privacy Protection Act", N.J.S.A. 39:2-3.4(c). I further certify that all the foregoing statements are true to the best of my knowledge. I understand that if any of the statements are willfully false, I am subject to punishment.

Date:	
	SIGNATURE OF REQUESTER

(Original Signature Only - Signature Stamps Are Unacceptable)

DO-22 (R 8/10) Page 2 of 2

NJ MVC/ Special Title Unit 225 E State Street Trenton, NJ 08666-0017

BUYER'S DECLARATION - EMERGENCY APPLICATION FOR VEHICLE TITLE

Buyer's Information:				Date: _	
First Name			Last Name		
Address			City	State	Zip Code
I purchased a vehicle on _that apply):	Date of Sale	_ from	Seller's Name	but never received -Registration	d the (check all
Vehicle information:			rancs		
Year Make		Vehicl	le Identification Number	r (VIN)	
Seller's Full First and Last Na	me and/or Name of I	Business			
Address			City	State	Zip Code
I ACKNOWLEDGE, that in to issue a vehicle title for the may issue the same as a con claims against this vehicle, and their officers, employees and	e above-described venience under the nd I therefore agree	vehicle pu e circumsta e to defend	rchased from the selle ances, by doing so, the l, indemnify and hold l	er listed above and that e NJMVC makes no assi harmless the State of Ne	although the NJM urances against futo w Jersey, the NJMV
arising out of any such claim I FURTHER ACKNOWLEI registration and/or plates as in connection with this Decla	OGE that this Decla described above, a	nd that an	ny knowing or willful r	nisrepresentation or fals	e statement submit
Signature			Print Name		
Driver License Number or Cor	poration Code				
Notary Public			Se	eal:	
OS/SS-150 (R12/07)					



Notice of Intent to Obtain Title Due to Improper Evidence of Ownership

	Full name of Applicant
	Street Address
	City, State, Zip Code
	Date
Full Name of Title Owner	
Street Address	
City, State, Zip Code	
Dear:	
This is to advise you that your vehicle/ vesselMake	Year Vehicle/Hull Identification Number
has been in my possession since	·
notice that in accordance with N.J.S.A.39:10-16 ap	uested mailing, notifying you and /or the lienholder to take as been made to the Chief Administrator of the New Jersey Certificate of Title to me for the listed vehicle/vessel.
	Sincerely,
CC:	Signature of Applicant
Lienholder name (if applicable)	
Street Address	
City, State, Zip Code	

To be sent certified to the vehicle Owner(s)



Notice of Intent to Obtain Title Due to Improper Evidence of Ownership

		_	Full name of Applicant
		5	Street Address
		Ō	City, State, Zip Code
		Ī	Date
Full Name of Title Owner			
Street Address			
City, State, Zip Code	_		
Dear:	_		
This is to advise you that your vehic	le/ vessel Make	, Year	,
		Tear	venicie/fruit identification (vunioe)
has been in my possession since	Date Obtained	-	
	S.A.39:10-16 application ha	as been made to the	fying you and /or the lienholder to take e Chief Administrator of the New Jerse me for the listed vehicle/vessel.
		Sincerely,	,
		Signature	of Applicant
CC:			
Lienholder name (if applicable)			
Street Address			
City, State, Zip Code			

To be sent certified to the vehicle's Lien Holder (if applicable)



Notice of Intent to Obtain Title Due to Improper Evidence of Ownership

		1	Full name of Applicant
		S	Street Address
		C	City, State, Zip Code
		_ [Date
Full Name of Title Owner	_		
Street Address	_		
City, State, Zip Code	_		
Dear:	_		
This is to advise you that your vehic	cle/ vessel	, Year	,
has been in my possession since _			venice/fran Identification (vanice)
	Date Obtained		
	S.A.39:10-16 application ha	as been made to the	ying you and /or the lienholder to take e Chief Administrator of the New Jersey me for the listed vehicle/vessel.
		Sincerely,	
		Signature	of Applicant
CC:			
Street Address			
City, State, Zip Code			

Retain by the applicant for later use with the returned certified receipt. (Step 5)



Notice of Intent to Obtain Title Due to Improper Evidence of Ownership

	Full name of Applicant
	Street Address
	City, State, Zip Code
	Date
Full Name of Title Owner	
Street Address	
City, State, Zip Code	
Dear:	
This is to advise you that your vehicle/ vessel _	Vehicle/Hull Identification Number
has been in my possession since	venicle/Hun ruentification (vulnor
Date Ob	
I am therefore, by means of this certified, retrostice that in accordance with N.J.S.A.39:10-1 Motor Vehicle Commission to receive title paper	the Chief Administrator of the New Jer
	ly,
	re of Applicant
	те от Аррисант
CC:	
Lienholder name (if applicable)	
Street Address	
City, State, Zip Code	

To be retained for applicants records



STATE OF NEW JERSEY

1-888-486-3339 ext. 5064 (in state) 1-609-292-6500 ext. 5064 (out of state)

Newspaper Publication Instructions

Advertise in a newspaper with general circulation in the County where you reside for space of two weeks, at least once a week, making three insertions in all. The notice should briefly state that you have applied to the Chief Administrator of the Motor Vehicle Commission for the issuance of a New Jersey certificate of ownership and if anyone desires to be heard in opposition of your application, he may do so by contacting the Chief Administrator within 10 days of the newspaper advertisement. Advertisement must include the year, make and full/correct vehicle/hull identification number.

(The newspaper will provide a certification that you have complied with these requirements.)

Sample Publication

		PLEASE DESCRIBE 1	THE VEHICLE	ACCURATELY	
VAKE OF	F VEHICLE (PRINT) MODE	EL	YEAR	COLOR	BODY TYPE
OMPLE ⁻	TE VEHICLE IDENTIFICATION NUMBER	(NOT THE MOTOR NUMBER)		NO.	. OF AXLES
DOME	ETER READING				
				TEN	THS
	CHECK R "NO" Does your vehicle	e now have a lien? (Is you	ır vehicle fin	anced?) Yes	No
	ecked "yes" PRINT name and ad	dress of bank or finance	company be	elow. If you checked "No",	print 'NONE" in the box be
됬 v	IAME OF BANK OR FINANCE COMPAN	Y (LIENHOLDER), IF NO LIEN	PRINT "NONE	"	
	IENHOLDER CORPCODE				
	STREET ADDRESS OF LIENHOLDER				
_	AND ADDRESS OF OWNER	AND CO-OWNER BE	LOW		
N/	AME				
- 11	.J. DRIVER LICENSE NO. (IF BUSINESS-C	ORPCODE)			
OWNER D	ATE OF BIRTH			EYE COLOR	SEX
	TREET				
CI	ITY, STATE, ZIP CODE				
N/	AME				
er N	.J. DRIVER LICENSE NO. (IF BUSINESS-C	ORPCODE)			
SO-OWNER	ATE OF BIRTH			EYE COLOR	SEX
	TREET				
ັ ∐_					
	ITY, STATE, ZIP CODE				
TATEN	MENTOF APPLICANT(S): The u	ndersigned hereby certif	ies all of the	above to be true and corr	rect and that the identifica
	shown on this form has been con particular.	npared to the identification	n numbero	n the motor vehicle and fu	rther certifies that they ag
SIGN			SIGN		
HERE	x		HERE	x	
	OWNER	DATE		CO-OWNER (if any)	DATE
SIGN			SIGN		
HERE	^		HERE	X	
	CO-OWNER (if any)	DATE		CO-OWNER (if any)	DATE

OS/SS-7 (R2/09)



STATE OF NEW JERSEY

1-888-486-3339 (in state) 1-609-292-6500 (out of state)

Application for Certificate of Title for Vessel

The Boat Ownership Certificate Act requires that vessels and hulls shall be titled. These articles are defined as follows.

- 1. Vessel means a boat or watercraft, other than a sea plane, used or capable of being used as a means of transportation on the water.
- 2. Hull means a vessel exclusive of all means of propulsion.
- 3. For the purpose of this act, all vessels more than 12 feet in length must be titled.

Instructions - Please Read Carefully

- 1) Owner or purchaser should submit any supporting documents as proof of ownership.
- 2) This form should be completed by the owner of a vessel or hull purchased prior to the effective date of the Boat Ownership Certificate Act, or purchased out of state, who does not have a Manufacturers Certificate of Origin or a Certificate of Ownership.
- 3) Please type or print clearly.

	Last Name	"'Fi	rst Name		""""Middle Initial
Owner	Street Address	""""City	ý		State Zip
Ó	NJ Driver License No. (if Business, Corp	oration Code)	Date of Birth	Sex	Eye Color
der	Name of Lienholder or Financial Institution	on		Corporation	Code (15 Digit)
Lienholder	Street Address		G		g:
Lie	City		State		Zip
int	Hull Identification Number (HIN)		Year	Make	
Equipment	Type of Boat	Length (Feet & Inches)		Hull Material	
Equi	Use	Type of Propulsion		Type of Fuel	
41.	undereigned berehvennly f	or Cortificate of Own			december de la como

I, the undersigned, hereby apply for Certificate of Ownership for the Vessel or Hull described above, and certify that the statements on this application are correct and true.

Owner Signature X	Purchase Price \$
Date	Sales/Use Tax \$
0S/SS-27 (R4/10)	Ex. Code Initials

STATE OF NEW JERSEY

BUYER'S CERTIFICATION

I, (name)	hereby certify that I am
either a licensed New Jersey dealer or that this vehicle is being purchased	for personal or business
use ONLY and NOT for the purpose of resale.	
Signature of Buyer:	Date: